



BARBARA K. CEGAVSKE
Secretary of State
Elections Division
101 North Carson Street, Suite 3
Carson City, Nevada 89701-3714
Phone: (775) 684-5705
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State of Nevada
**Committee for Political Action
(PAC)**
Registration Form
Page 1

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JAN 19 2016

SECRETARY OF STATE
ELECTIONS DIVISION

#2373 *km*
ABOVE SPACE IS FOR OFFICE USE ONLY

- ☐ New Registration ☐ PAC (Advocating Passage or Defeat of a Ballot Question)
- ☒ Annual (Due on or before January 15th of each year; NRS 294A.230(4)(b))
- ☐ Amended Registration: ☐ Change Officers ☐ Change Registered Agent ☐ Change Address
check all that apply
- ☐ Change Name
Previous Name of PAC
- ☐ Other:

Name of Committee:
Partnering for Nevada's Future

Telephone:
702-896-1453

Mailing Address:

246 Garfield Dr.
Street Name, Number

Henderson
City

NV 89074
State Zip Code

PAC Active Email Address: jwoodhouse642@yahoo.com

PURPOSE: Briefly state the purpose for which the PAC was organized.
To support and/or oppose state candidates.

REGISTERED AGENT: pursuant to NRS 294A.240, each PAC must appoint and keep in the State a registered agent, as provided in NRS 14.020, who must be a natural person who resides in the State of Nevada.

Name of Registered Agent:

Joyce Woodhouse

Telephone:
702-896-1453

Physical Address:

246 Garfield Dr.
Street Name, Number

Henderson
City

NV 89074
State Zip Code

REGISTERED AGENT ACCEPTANCE: I hereby accept appointment as Registered Agent for the above-named Committee for Political Action.

X *Joyce Woodhouse*
Signature of Registered Agent

Date:
01-13-2016



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Page 2

OFFICERS: List the name, title, address and telephone number of each officer (attach additional pages if necessary).

Officer Name and Title:

Joyce Woodhouse, Chair

Mailing Address:

246 Garfield Dr.

Street Name, Number

Henderson

City

Telephone:

702-896-1453

NV 89074

State Zip Code

Officer Name and Title:

Sue Longson, Treasurer

Mailing Address:

4851 W 6600 N

Street Name, Number

Cedar City

City

Telephone:

702-521-2162

NV 84721

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Officer Name and Title:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

AFFILIATIONS: If the PAC is affiliated with any other organizations, list the name, address and telephone number of each organization (please attach additional pages if necessary).

Name of Organization:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Name of Organization:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

Name of Organization:

Telephone:

Mailing Address:

Street Name, Number

City

State Zip Code

SUBMITTED BY:

X 
Signature of Representative of Group

Printed Name:

Sue Longson

Date:

01/13/2016

Telephone:

702.521.2162